

## [The Summer Soccer School](#)

### **APPLICATION**

Players Name \_\_\_\_\_

Parents Name \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Phone (H) \_\_\_\_\_

Phone (Alt.) \_\_\_\_\_

Age \_\_\_\_ Male or Female (circle)

### **Parent approval and medical release:**

Recognizing the possibility of injury, both physical and mental, associated with soccer, and in consideration for The Summer Soccer School and its affiliates including The Ohio Premier Soccer Club accepting the registrant for its soccer camp program(s) and associated activities I hereby release, discharge and otherwise indemnify The Summer Soccer School, its affiliated organizations, and sponsors, their employees and associated personnel, including the owners of the fields and facilities used for the programs against any claim by or on behalf of the registrant as a result of the registrants participation in the program and/or being transported to and from the same, which transportation I hereby authorize.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Checks payable to: The Summer Soccer School

5168 Wildcat falls Blvd

Dublin, Ohio 43016

Venmo- @Kevin-Dougherty-77

**Register online at: [tinyurl.com/GN5G6NU](https://www.tinyurl.com/GN5G6NU)**

### **Camp(s) Check all that apply**

Soccer Academy June 3-July 11th T,TH,Fri

☐ Ball Mastery 9:00 am \$20/session

☐ Striker Academy 10:15 \$20/session

☐ Both \$40



**venmo**

